

ISSUE SLIP STAPLE AREA (for additional cross reference)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|--------------------|
| FEE DETERMINATION | lw | 68904 | 2/9/00 |
| O.I.P.E. CLASSIFIER | | 43 | 2/27/00 |
| FORMALITY REVIEW | | | |
| RESPONSE FORMALITY REVIEW | Dm | 72223 | 3-24-00 6/29/00 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

| Claim | Date |
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| Claim | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet here

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